What If Your Body Just Needs the Right Frequency? Danielle Palmer and Natalie Sakamoto - California Transcript

(Transcripts are generated by AI and may contain errors)

Introduction u2014 what is SCENAR?

Welcome to the Wellness [music] on Tap Welcome to the Wellness [music] on Tap podcast with your host, Dr. Debs podcast with your host, Dr. Debs Eastwood.

How Natalie discovered frequency medicine through her dog

Eastwood. Eastwood. >> Just give me animals. They vibrate so >> Just give me animals. They vibrate so much better than we do. much better than we do.

Danielle's story u2014 juvenile rheumatoid arthritis from age two

Almost going completely blind u2014 and what actually helped

>> Oh, >> Oh, >> Oh, >> you know, they take in any kind of >> you know, they take in any kind of treatment so much faster. treatment so much faster. >> Okay.

>> Okay. >> Okay.

The body doesn't turn on itself without reason

>> Cuz they're not in their head about >> Cuz they're not in their head about anything. anything. anything.

Root canals, mercury fillings and systemic disease

>> So, just in case anybody's wondering >> So, just in case anybody's wondering what the hell we're talking about here, what the hell we're talking about here, we're talking about the modality of we're talking about the modality of Skar, are we not?

Skar, are we not? >> Yeah. Micro frequency bio feedback. Yes. >> Yeah. Micro frequency bio feedback. Yes.

Working with oncology and ALS patients

>> Yes. So, please explain, ladies. So >> Yes. So, please explain, ladies.

Treating the person not the condition

So Danielle and Natalie, welcome. Please Danielle and Natalie, welcome.

Why they built their own training program

Please explain what Skar is. So well, Scannar explain what Skar is.

Building an army of frequency therapists

So well, Scannar is a device that essentially speaks the is a device that essentially speaks the exact same language as your nervous exact same language as your nervous system. So every millisecond, it sends system.

Frequency medicine meets Western medicine u2014 where they fit together

Emotions, food and the full picture of health

So every millisecond, it sends out an impulse, reads what the body out an impulse, reads what the body sends back, and then it's adjusting sends back, and then it's adjusting itself intelligently to help guide your itself intelligently to help guide your body back to normal. It's actually an body back to normal. It's actually an FDA class 2 medical device for acute and FDA class 2 medical device for acute and chronic pain. But truly the magic behind chronic pain.

Wrap-up

But truly the magic behind the device is the fact that it actually the device is the fact that it actually speaks to your sea fibers of your speaks to your sea fibers of your nervous system nervous system >> and that is the interface from the >> and that is the interface from the outside world to the inside world and outside world to the inside world and most devices completely bypass them.

most devices completely bypass them. >> So that is the true magic behind that >> So that is the true magic behind that device. device. device. >> So other devices then what sort of >> So other devices then what sort of things are the ones that don't things are the ones that don't >> well they're have the magic?

>> well they're have the magic? >> They're talking at the body and not with >> They're talking at the body and not with the body. the body. This is getting feedback. So your body This is getting feedback. So your body is responding to the wavelength and it's is responding to the wavelength and it's same language, right? Other things are same language, right? Other things are not necessarily the same wavelength. So not necessarily the same wavelength. So it's not the same language, but no it's not the same language, but no matter what, you're being affected by matter what, you're being affected by wavelengths, microcurrent, sound, wavelengths, microcurrent, sound, whatever the wavelength is, your body whatever the wavelength is, your body still is affected in a way. But this is still is affected in a way. But this is taking that idea and making it taking that idea and making it intelligent and conversational back and intelligent and conversational back and forth.

forth. forth. >> I like that. So it's removing the >> I like that. So it's removing the language barrier. Yes. language barrier. Yes. >> Exactly. >> Exactly.

>> Exactly. >> We don't need the Babel fish. Certain >> We don't need the Babel fish. Certain people will understand that reference. people will understand that reference.

Others [laughter] won't. Others [laughter] won't. >> Exactly. >> Exactly. >> Exactly. >> Or Google Translate in >> Or Google Translate in >> Yeah. Exactly. Well, and too, a lot of >> Yeah. Exactly. Well, and too, a lot of devices, they use a repetitive wave. So, devices, they use a repetitive wave. So, they're using either a sine wave or a they're using either a sine wave or a square wave, right? So, it's this square wave, right? So, it's this repetitive wave. And the interesting repetitive wave. And the interesting thing about the C fibers is there has to thing about the C fibers is there has to be a very particular shape to that wave.

be a very particular shape to that wave. And so the shape of the Skinar device And so the shape of the Skinar device and there's also an American version and there's also an American version which is called the biomodulator. So which is called the biomodulator. So those two devices are the only ones in those two devices are the only ones in the world that actually peak and the world that actually peak and stimulate the sea fibers because they're stimulate the sea fibers because they're so gentle. It's very so gentle. It's very So you referenced America.

So you referenced America. >> Yeah. >> Yeah. >> Yeah. >> Can I ask where you lovely ladies have >> Can I ask where you lovely ladies have traveled from to be on my podcast today?

traveled from to be on my podcast today? We came all the way from California to We came all the way from California to be on your podcast. be on your podcast.

>> Yes. [laughter] All the way across the >> Yes. [laughter] All the way across the pond to come here. pond to come here. >> Yeah. Which is amazing. >> Yeah. Which is amazing.

>> And thank you for having us. Oh, >> And thank you for having us. Oh, >> my pleasure. Absolutely my pleasure. I'm >> my pleasure. Absolutely my pleasure. I'm delighted. Um, but while you're here, delighted. Um, but while you're here, you're also you're also both facilitating training.

both facilitating training. >> Yes. >> Yes. >> Yes. >> For people that want to learn this >> For people that want to learn this amazing modality, aren't you?

amazing modality, aren't you? >> Yeah. So, very excited. We've built a >> Yeah. So, very excited. We've built a educational program to teach people to educational program to teach people to be practitioners of the scanner device be practitioners of the scanner device and Danielle's trained decades ago and and Danielle's trained decades ago and myself, you know, a good handful of myself, you know, a good handful of years ago and being an educator and years ago and being an educator and taken dozens and dozens of courses and taken dozens and dozens of courses and all kinds of things, we we found all kinds of things, we we found something missing in everything that we something missing in everything that we were learning. And so we've built the were learning. And so we've built the course that we would have loved to have course that we would have loved to have as practitioners ourselves.

as practitioners ourselves. >> Yeah. Because we found essentially a lot >> Yeah. Because we found essentially a lot of people, of people, >> you know, basically would teach a >> you know, basically would teach a protocol, but they wouldn't teach the protocol, but they wouldn't teach the methodology behind why you're doing that methodology behind why you're doing that protocol. So, you know, therapists would protocol. So, you know, therapists would come and they would have this box of come and they would have this box of tools to use, but they didn't tools to use, but they didn't necessarily know how that tool was necessarily know how that tool was created, why it was created, right? and created, why it was created, right? and the the methodology behind that. So the the methodology behind that. So essentially what we did is you know essentially what we did is you know because we've done trainings all around because we've done trainings all around the world and so we took basically the the world and so we took basically the missing pieces and we put them all missing pieces and we put them all together so that it's a very clear together so that it's a very clear picture of not just the science behind picture of not just the science behind the device. Actually it's a very deep the device. Actually it's a very deep dive of the science and the physiology dive of the science and the physiology behind the device but also we're not behind the device but also we're not just teaching therapists protocols. We just teaching therapists protocols. We teach them to think intelligently to teach them to think intelligently to think clinically. Why am I doing this?

think clinically. Why am I doing this? why would I choose to do this versus a why would I choose to do this versus a different protocol? And there's [snorts] different protocol? And there's [snorts] a lot of people out there that are a lot of people out there that are teaching very passively. They teach teaching very passively. They teach methods where, you know, oh yeah, just methods where, you know, oh yeah, just put the device on, you know, we can use put the device on, you know, we can use gloves. We can, you know, be very just gloves. We can, you know, be very just passive. We don't work like that passive. We don't work like that anymore.

anymore. anymore. >> The world is so different from what it >> The world is so different from what it was 50, 60 years ago, right? We cannot was 50, 60 years ago, right? We cannot be passive anymore. our bodies have so be passive anymore. our bodies have so much distraction going on and there's so much distraction going on and there's so much bad information coming at us that much bad information coming at us that we have to be more aggressive in our we have to be more aggressive in our treatment styles which is why Natalie treatment styles which is why Natalie and I have such such success you know and I have such such success you know clinically with all of the locations clinically with all of the locations that we are at that our teams are at that we are at that our teams are at with you know complex diagnosis with you know complex diagnosis >> right and so I mean what you've just >> right and so I mean what you've just described to me about what you guys described to me about what you guys teach just seems like well surely teach just seems like well surely everybody Nobody should be doing that.

everybody Nobody should be doing that. It just seems like the most logical, It just seems like the most logical, sensible sensible sensible >> thing to do. Bravo for bringing it >> thing to do. Bravo for bringing it together.

together. together. >> Thank you. It was a lot of work. >> Thank you. It was a lot of work. Hundreds and hundreds of hours. Hundreds and hundreds of hours.

>> Yes. And I always tease it's also >> Yes. And I always tease it's also hundreds and hundreds of sticky notes. hundreds and hundreds of sticky notes.

>> Yes. [laughter] >> Yes. [laughter] >> That's how it started. >> That's how it started. >> Sticky notes. >> Sticky notes. >> Yeah. Remember this, remember that, do >> Yeah. Remember this, remember that, do this, do that kind of thing.

this, do that kind of thing. >> Yep. Wow. Exactly. >> Yep. Wow. Exactly. >> Yeah. Every subject we wanted to cover, >> Yeah. Every subject we wanted to cover, we just wrote it down and we're like, we just wrote it down and we're like, "Okay, "Okay, "Okay, >> that's our framework." And then we built >> that's our framework." And then we built it out from sticky notes. [laughter] it out from sticky notes. [laughter] >> Wonderful.

>> Wonderful. >> Wonderful. >> So >> So >> So going back in time then, going back in time then, >> why did it attract you? I'll ask you >> why did it attract you? I'll ask you both the same question if that's all both the same question if that's all right. Why did this modality or holistic right. Why did this modality or holistic health in general, what what was it that health in general, what what was it that happened?

happened? happened? >> Well, I started my journey at 17, >> Well, I started my journey at 17, 25 years ago. I 25 years ago. I did health career orientated classes in did health career orientated classes in my last year of high school and I went my last year of high school and I went straight into massage therapy program straight into massage therapy program and from there that's that's what I did.

and from there that's that's what I did. I was a massage therapist. I specialized I was a massage therapist. I specialized in sports therapy, chiropractic in sports therapy, chiropractic um but I also had a huge passion for um but I also had a huge passion for like nonprofit organizations and just like nonprofit organizations and just helping people.

helping people. And then my career led me to teach at And then my career led me to teach at the top college in the US for massage the top college in the US for massage therapy and neuromuscular therapy. And therapy and neuromuscular therapy. And in that I met Danielle as one of my in that I met Danielle as one of my students in 2019. And after class she students in 2019. And after class she asked me a question about a client and I asked me a question about a client and I looked at her and I said, "You are a looked at her and I said, "You are a brand new massage therapist student.

brand new massage therapist student. What do you have clients for?" And then What do you have clients for?" And then she told me and I'm like, "Okay, that's she told me and I'm like, "Okay, that's interesting. Can you treat my dog?

interesting. Can you treat my dog? Cuz I had a pitbull mastiff mix. She was Cuz I had a pitbull mastiff mix. She was a big girl and she could not move her a big girl and she could not move her head or neck and I tried everything.

head or neck and I tried everything. >> Acupuncture, obviously, massage. She was >> Acupuncture, obviously, massage. She was on a gamut of different medication and on a gamut of different medication and it did not touch her.

it did not touch her. >> The doctors couldn't give me a >> The doctors couldn't give me a straightforward diagnosis either as to straightforward diagnosis either as to why she was in so much pain.

why she was in so much pain. >> And after the first session with Skenar >> And after the first session with Skenar

and Danielle, it was gone. And we and Danielle, it was gone. And we probably treated her six times total.

probably treated her six times total. >> And then that was it. And I said to her, >> And then that was it. And I said to her, I'm like, "Okay, I need to know how to I'm like, "Okay, I need to know how to do this." And then from there, I got my do this." And then from there, I got my training with the Revenco Academy. And training with the Revenco Academy. And then a couple years later, she's like, then a couple years later, she's like, "Hey, do you want to leave your corner "Hey, do you want to leave your corner office and join me in business?" And I office and join me in business?" And I never looked back.

never looked back. >> Excellent. >> Excellent. >> Excellent. >> Corner office salary job, >> Corner office salary job, >> salary, holidays, windows, you know, >> salary, holidays, windows, you know, [laughter] all the things. Health [laughter] all the things. Health insurance, all the things. and just insurance, all the things. and just throw all that security out the window.

throw all that security out the window. >> I had an infant and a mortgage and I'm >> I had an infant and a mortgage and I'm like, "All right, let's let's go left like, "All right, let's let's go left when everyone else is going right." So when everyone else is going right." So you you you >> and I don't regret it. Not one single >> and I don't regret it. Not one single day. I get to travel. I get to teach day. I get to travel. I get to teach again, you know, I get to help people again, you know, I get to help people and one-on-one and the universe just you and one-on-one and the universe just you take that route and you put that energy take that route and you put that energy out there and the universe provides.

out there and the universe provides. >> Wonderful. I love that. I'm a huge >> Wonderful. I love that. I'm a huge believer in the universe and just being believer in the universe and just being open to receive.

open to receive. >> Yes. which you clearly were by that huge >> Yes. which you clearly were by that huge demonstration of faith and the movement. demonstration of faith and the movement. [snorts] [snorts] [snorts] >> Yeah.

>> Yeah. >> Yeah. >> Yeah. >> Yeah. >> Yeah. >> Yeah. I remember sitting down to that >> Yeah. I remember sitting down to that dinner with you and uh your family and dinner with you and uh your family and you know you know >> I I just appreciate that your husband >> I I just appreciate that your husband was so supportive. Like she's got was so supportive. Like she's got [clears throat] the best husband. Like [clears throat] the best husband. Like he's so supportive. He's just like you he's so supportive. He's just like you go honey, you know? And so yeah, we get go honey, you know? And so yeah, we get to travel the world together and teach to travel the world together and teach and it's been such a fun and it's been such a fun >> fun journey. Wonderful.

>> fun journey. Wonderful. >> Yeah. >> Yeah. >> Yeah. >> So, where did it start for you then, >> So, where did it start for you then, Danielle? Danielle?

Danielle? >> Mine started uh a little further back. >> Mine started uh a little further back. So, um I had my own health journey and So, um I had my own health journey and it started when I was two.

it started when I was two. >> Okay. >> Okay. >> Okay. >> Yeah. So, at 2 years old, I was >> Yeah. So, at 2 years old, I was diagnosed with juvenile rheumatoid diagnosed with juvenile rheumatoid arthritis.

arthritis. arthritis. >> Ouch. >> Ouch. >> Ouch. >> Yeah. My mom and dad, you know, I I was >> Yeah. My mom and dad, you know, I I was having trouble walking, I guess, you having trouble walking, I guess, you know, and I um know, and I um >> I was limping. I just wasn't able to >> I was limping. I just wasn't able to move properly and so they kind of move properly and so they kind of started going down that rabbit hole of started going down that rabbit hole of trying to figure out what's wrong with trying to figure out what's wrong with my kid. Right.

my kid. Right. >> Yes, of course. >> Yes, of course. >> And um so they took me to Stanford and I >> And um so they took me to Stanford and I got diagnosed by the leading expert at got diagnosed by the leading expert at Stanford um in California and uh Stanford um in California and uh basically he said, "Well, she's either basically he

said, "Well, she's either going to grow out of it or she's going going to grow out of it or she's going to be in a wheelchair for the rest of to be in a wheelchair for the rest of her life." her life." >> Great bedside manner, right?

>> Great bedside manner, right? >> Yeah. That's really helpful. Yeah. Yeah. >> Yeah. That's really helpful. Yeah. Yeah. So obviously, you know, spoiler alert, So obviously, you know, spoiler alert, I'm not in a wheelchair, [laughter] I'm not in a wheelchair, [laughter] >> but I did have chronic pain >> but I did have chronic pain >> my entire life and that was my baseline, >> my entire life and that was my baseline, you know, that was the only thing that I you know, that was the only thing that I knew. So that was just that was normal knew. So that was just that was normal for me. And um I still played sports, for me. And um I still played sports, you know, I was very active. I played you know, I was very active. I played basketball, volleyball, softball, basketball, volleyball, softball, soccer, NCAA, division one fencing, you soccer, NCAA, division one fencing, you know, I did a lot. Um but my know, I did a lot. Um but my basically last year of college and I was basically last year of college and I was studying something completely different.

studying something completely different. I had these two friends. It was a doctor I had these two friends. It was a doctor and nurse couple that were retired and and nurse couple that were retired and uh the nurse had such bad sinus issues uh the nurse had such bad sinus issues that she, you know, went to one of her that she, you know, went to one of her nurse practitioner friends and her nurse practitioner friends and her friend was like, "Let me just try friend was like, "Let me just try something on you." And she had a Skin something on you." And she had a Skin Art device.

Art device. >> Okay. >> Okay. >> Okay. >> And so she worked on her for about 15 >> And so she worked on her for about 15 minutes. minutes. minutes. >> Entire lobe cleared and she was like, >> Entire lobe cleared and she was like, "What is this thing?" And so they ended "What is this thing?" And so they ended up actually coming out of retirement and up actually coming out of retirement and opening a practice just to do skin art.

opening a practice just to do skin art. >> Yeah. In in California. And they were >> Yeah. In in California. And they were like, you know, I know that you're doing like, you know, I know that you're doing this other thing, but I feel like you this other thing, but I feel like you would be really good at this. Would you would be really good at this. Would you be interested in maybe working with us?

be interested in maybe working with us? And I had been in a car accident a few And I had been in a car accident a few years prior. I had tension headaches years prior. I had tension headaches every single day. Major whiplash, you every single day. Major whiplash, you know, and I had some prior injuries uh know, and I had some prior injuries uh like with my jaw and things like that like with my jaw and things like that that kind of amplified what was that kind of amplified what was happening. So, I was living on happening. So, I was living on medication for my tension headaches, you medication for my tension headaches, you know, that was just daily for me at that know, that was just daily for me at that point. and somebody worked on me and in point. and somebody worked on me and in about 15 20 minutes I could move my neck about 15 20 minutes I could move my neck more than I had in years my tension more than I had in years my tension headache started going away and I was headache started going away and I was like okay there's there's something to like okay there's there's something to this this this >> I want to know more >> I want to know more >> yeah so I was like all right so I ended >> yeah so I was like all right so I ended up getting trained in the states first up getting trained in the states first and I trained um at that point in time and I trained um at that point in time trainings were run by the Australians so trainings were run by the Australians so our health USA and so I got trained with our health USA and so I got trained with them I worked in that private practice them I worked in that private practice for about seven years and then I decided for about seven years and then I decided you know what if I'm going to do do you know what if I'm going to do do this. I want to be the best of the best.

this. I want to be the best of the best. And so I went and I wanted to learn And so I went and I wanted to learn straight from the horse's mouth, right?

straight from the horse's mouth, right? And so I came over here actually to the And so I came over here actually to the UK and I trained with the Rebenco UK and I trained with the Rebenco family. Um I did I redid all of my family. Um I did I redid all of my initial training. I did master classes, initial training. I did master classes, more master

classes, more advanced more master classes, more advanced classes and then I became an assistant classes and then I became an assistant instructor with them. Um and then just instructor with them. Um and then just kept learning and learning. I started kept learning and learning. I started learning all these other frequency learning all these other frequency modalities, you know, with FSM, Dr.

modalities, you know, with FSM, Dr. Carolyn McMaken, studied with Dr. Jerry Carolyn McMaken, studied with Dr. Jerry Tenant, you know, all these different Tenant, you know, all these different rabbit holes. Um, studied energy rabbit holes. Um, studied energy medicine and bio resonance. And then medicine and bio resonance. And then finally, I was like, you know what, now finally, I was like, you know what, now [snorts] I want to go down and do a deep [snorts] I want to go down and do a deep dive on the body. And so I found the dive on the body. And so I found the most uh advanced, you know, program that most uh advanced, you know, program that I could that would be, you know, doable I could that would be, you know, doable for me. And so I found the advanced for me. And so I found the advanced neuromuscular therapy program at the neuromuscular therapy program at the National Holistic Institute where National Holistic Institute where Natalie was my principal essentially.

Natalie was my principal essentially. And that's [laughter] how Yeah, that's And that's [laughter] how Yeah, that's how we met. how we met. >> So I laughed at her joke. We we became >> So I laughed at her joke. We we became friends in class and uh well obviously friends in class and uh well obviously after I was no longer a student of after I was no longer a student of course course course >> uh [laughter] >> uh [laughter] and yeah we've been working together and yeah we've been working together ever since and definitely would not be ever since and definitely would not be where I'm at without her. So very where I'm at without her. So very grateful. I grateful. I >> I always tease that I talk about how we >> I always tease that I talk about how we met more than I talk about how my met more than I talk about how my husband and I met. [laughter] husband and I met. [laughter] >> She's my work wife. It's really >> She's my work wife. It's really >> contractually married.

>> contractually married. >> Yep. Pretty much in business. >> Yep. Pretty much in business. >> Which is amazing. That's amazing. So, >> Which is amazing. That's amazing. So, can I just take you back a little bit, can I just take you back a little bit, Danielle? When you said, you know, you Danielle? When you said, you know, you had your diagnosis very young had your diagnosis very young >> and you were struggling walking. Did it >> and you were struggling walking. Did it mainly just affect your lower limbs?

mainly just affect your lower limbs? >> Was it everywhere? >> Was it everywhere? >> So, when I was little, it was my knees. >> So, when I was little, it was my knees.

And I mean, I had multiple knee injuries And I mean, I had multiple knee injuries when I was young just because I had such when I was young just because I had such a weakness there. I've dislocated both a weakness there. I've dislocated both my knees multiple times. I've had my knees multiple times. I've had multiple tears in my knees. Um, but multiple tears in my knees. Um, but what's interesting is actually when I what's interesting is actually when I was older, I started losing my vision in was older, I started losing my vision in my right eye. I almost went completely my right eye. I almost went completely blind because of uvitis. And I didn't blind because of uvitis. And I didn't realize that that was something that realize that that was something that could happen later in life, you know, could happen later in life, you know, with an with a autoimmune disease.

with an with a autoimmune disease. >> And so actually like these types of >> And so actually like these types of therapies, you know, skinar was a big therapies, you know, skinar was a big part of that, part of that, >> biomodulator, u the beamer, like >> biomodulator, u the beamer, like multiple devices, that was a huge part multiple devices, that was a huge part because I had so much inflammation because I had so much inflammation >> in my body.

>> in my body. that needed to be dealt with. Yeah. I that needed to be dealt with. Yeah. I literally almost went blind. And so now, literally almost went blind. And so now, and you know, Western Med, their only and you know, Western Med, their only approach was to give me steroids. So I approach was to give me steroids. So I literally used to have to get shots in literally used to have to get shots in my eye.

my eye. >> And that kind of >> And that kind of >> held back the dam, you know, a little >> held back the dam, you

know, a little bit, but it was this that actually bit, but it was this that actually >> helped me. And so now I move better than >> helped me. And so now I move better than I did when I was 19, you know, and I'm I did when I was 19, you know, and I'm 38. [laughter] 38. [laughter] And um so yeah, now I I'm actually way And um so yeah, now I I'm actually way healthier. I feel so much better. You healthier. I feel so much better. You know, my my eye I have great vision know, my my eye I have great vision aside from I have a cataract aside from I have a cataract >> from the steroids.

>> from the steroids. >> Oh jeez. So working on getting rid of >> Oh jeez. So working on getting rid of that. But other than that, yeah, that. But other than that, yeah, everything's so much better now.

everything's so much better now. And the way you described that with the And the way you described that with the steroid injections, steroid injections, >> first of all, injections in your eyes >> first of all, injections in your eyes and my cousin was having to have those and my cousin was having to have those for a different reason. She got um wet for a different reason. She got um wet macular degeneration and was having the macular degeneration and was having the injections in her eyes. [snorts] injections in her eyes. [snorts] >> Unfortunately, not with the same level >> Unfortunately, not with the same level of success as I'm very pleased to hear of success as I'm very pleased to hear that you had. Um but that's another that you had. Um but that's another story. But the way you described it as story. But the way you described it as the steroids holding back the dam.

the steroids holding back the dam. >> Yeah. >> Yeah. >> Yeah. >> So treating the symptoms, which I'm sure >> So treating the symptoms, which I'm sure you were grateful for, but not even you were grateful for, but not even bothering to look bothering to look >> for the root cause. And that's the >> for the root cause. And that's the difference, isn't it?

difference, isn't it? >> That is the difference. Yeah. the body >> That is the difference. Yeah. the body doesn't just turn on itself, you know, doesn't just turn on itself, you know, and that's something that, you know, and that's something that, you know, because we work with a lot of very because we work with a lot of very compromised patients compromised patients >> and it kills me that Western medicine >> and it kills me that Western medicine says, you know, oh yeah, the body's says, you know, oh yeah, the body's just, you know, attacking itself or, oh just, you know, attacking itself or, oh yeah, we have no idea why the body's yeah, we have no idea why the body's just doing this, you know, it's like the just doing this, you know, it's like the body doesn't just turn on itself for no body doesn't just turn on itself for no reason. There's always a reason. If reason. There's always a reason. If Western medicine tells you, you know, oh Western medicine tells you, you know, oh yeah, there's nothing that we can do, yeah, there's nothing that we can do, I'm sorry, turn over every rock and I'm sorry, turn over every rock and stone. You know, if they give you a stone. You know, if they give you a expiration date, which is something that expiration date, which is something that I hate, especially in this I hate, especially in this >> because people can live to that, can't >> because people can live to that, can't they?

they? they? >> Exactly. Yeah. That's been >> Exactly. Yeah. That's been psychologically proven, right? You know, psychologically proven, right? You know, if they say, "Oh, you have this much if they say, "Oh, you have this much time. I'm sorry, but you are not God." time. I'm sorry, but you are not God." >> Exactly.

>> Exactly. >> Exactly. >> You don't get to dictate how long >> You don't get to dictate how long somebody has. somebody has. >> Right. So, >> Right. So, >> no. And you'd think that that would have >> no. And you'd think that that would have practice would have stopped by now practice would have stopped by now because how many times have they been because how many times have they been proven so wrong?

proven so wrong? >> Yep. >> Yep. >> Yep. >> Yeah. Countless. Just countless times. >> Yeah. Countless. Just countless times. >> Yeah. >> Yeah. >> Yeah.

And mindset makes the biggest And mindset makes the biggest difference. And we tell our clients that difference. And we tell our clients that every time.

every time. >> Yeah. >> Yeah. >> Yeah. >> Mindset. If you're like, "No, that's not >> Mindset. If you're like, "No, that's not happening." And they disprove their happening." And they disprove their doctors every time. When they

have that doctors every time. When they have that type of mindset, it just changes the type of mindset, it just changes the whole game. Every cell listens to you.

whole game. Every cell listens to you. >> Yeah. >> Yeah. >> Yeah. >> And so when that happens, then your >> And so when that happens, then your body's going to work for you.

body's going to work for you. >> Yeah. >> Yeah. >> Yeah. >> So SC is really getting in >> So SC is really getting in at the root cause level then. at the root cause level then.

>> Yeah. See that's the different you know >> Yeah. See that's the different you know everybody always focuses on the everybody always focuses on the biological and chemical aspect of the biological and chemical aspect of the body right we are these you know body right we are these you know biological creatures right but what biological creatures right but what drives that it's the electrical drives that it's the electrical andformational andformational andformational right so we if you think about your body right so we if you think about your body a little bit differently than what we've a little bit differently than what we've been taught we're kind of like this big been taught we're kind of like this big amazingly designed computer well that amazingly designed computer well that computer needs to make sure that number computer needs to make sure that number one all the wiring is intact one all the wiring is intact >> right so have we been you know damaged >> right so have we been you know damaged places you know scars surgeries things places you know scars surgeries things like about root canals big thing.

like about root canals big thing. [snorts] [snorts] [snorts] >> Um so is your electricity flowing >> Um so is your electricity flowing properly right? Uh every single cell properly right? Uh every single cell operates with its you know healthy operates with its you know healthy electrical point. So essentially you electrical point. So essentially you know it was actually taught for quite a know it was actually taught for quite a while that cells ran all at 25 molts.

while that cells ran all at 25 molts. That's not the case. No. That's not the case. No. >> You know no every single cell has a >> You know no every single cell has a different job and so it has a different different job and so it has a different healthy charge. But what happens when healthy charge. But what happens when the cell doesn't have that healthy the cell doesn't have that healthy charge? it doesn't communicate properly, charge? it doesn't communicate properly, right? Because right? Because >> yeah, >> yeah, >> yeah, >> it's natural language, voltage and >> it's natural language, voltage and frequency. So truly that's what skinar frequency. So truly that's what skinar is doing is number one, it's an electron is doing is number one, it's an electron donor, so it's giving your body that donor, so it's giving your body that charge, but also it's correcting that charge, but also it's correcting that software.

software. software. >> Mhm. >> Mhm. >> Mhm. >> Which is so important nowadays. >> Which is so important nowadays. >> Yeah. Yeah. So, I'm going to pick up on >> Yeah. Yeah. So, I'm going to pick up on what you just said there again as well what you just said there again as well with regards to the root canal because with regards to the root canal because you mentioned about some really you mentioned about some really compromised patients and I'd like to compromised patients and I'd like to explore that a little bit as well, the explore that a little bit as well, the type of patients, but [snorts] type of patients, but [snorts] the whole thing with the root canal the whole thing with the root canal apart from the whole thought of it just apart from the whole thought of it just making me shudder.

making me shudder. >> Yeah. >> Yeah. >> Yeah. >> What is it specifically? Cuz I've spoken >> What is it specifically? Cuz I've spoken to people about, you know, holistic to people about, you know, holistic dentists dentists dentists >> who talk about the meridians in the >> who talk about the meridians in the teeth. Is that the sort of thing that teeth. Is that the sort of thing that we're talking about here? part of it.

we're talking about here? part of it. Yeah. Every single tooth correlates Yeah. Every single tooth correlates with, you know, different organ systems.

with, you know, different organ systems. >> Organ systems. Yes. And they're each >> Organ systems. Yes. And they're each section is tied to the meridians, but section is tied to the meridians, but specifically with the root canals

is specifically with the root canals is they're leaving dead tissue behind.

they're leaving dead tissue behind. >> The only surgery only that you can leave >> The only surgery only that you can leave dead tissue behind. And if you think dead tissue behind. And if you think that every root in your tooth is tied to that every root in your tooth is tied to your nervous and your circulatory system your nervous and your circulatory system and if there's a pocket even the most and if there's a pocket even the most minute little pocket left in that root minute little pocket left in that root canal if it's not done completely canal if it's not done completely properly that's just hosting bacterias properly that's just hosting bacterias and different virus that is then just and different virus that is then just circulating and then straight to your circulating and then straight to your nervous system and everywhere every nervous system and everywhere every other type of system whether it's your other type of system whether it's your circulatory nervous electrical.

circulatory nervous electrical. So, So, So, >> and the problem is, yeah, on typical >> and the problem is, yeah, on typical imaging, you can't see that.

imaging, you can't see that. >> So, if you know dentists are looking >> So, if you know dentists are looking with X-rays or things like that, you with X-rays or things like that, you can't tell can't tell >> because the way that you can actually >> because the way that you can actually see is with something called a cone beam see is with something called a cone beam scan because you can actually get the scan because you can actually get the bone density reading.

bone density reading. >> So, they can see if there's a pocket in >> So, they can see if there's a pocket in there because you can't see it with your there because you can't see it with your eyes.

eyes. eyes. >> No. >> No. >> No. >> Yeah. So, people walking around with >> Yeah. So, people walking around with massive infection in their mouths and massive infection in their mouths and have no idea.

have no idea. >> Yeah. until it's a full-on abscess and >> Yeah. until it's a full-on abscess and they're in immense amount of pain. And they're in immense amount of pain. And at that point, it is just at that point, it is just >> it's it whatever has been in there is >> it's it whatever has been in there is starting to go systemic. I mean, you starting to go systemic. I mean, you might not necessarily get systemic might not necessarily get systemic infection, but that's not staying here.

infection, but that's not staying here. >> Yeah. >> Yeah. >> Yeah. >> That's not staying just in your mouth. >> That's not staying just in your mouth.

>> Mhm. I can't tell you how many times, >> Mhm. I can't tell you how many times, you know, with patients that we've you know, with patients that we've worked with where we do the analysis worked with where we do the analysis that we do because we do a specialized that we do because we do a specialized analysis that looks at, you know, all analysis that looks at, you know, all these compromised areas of the body.

these compromised areas of the body. Can't tell you how many times we found, Can't tell you how many times we found, oh wow, remember that root canal that oh wow, remember that root canal that you got 30 years ago. It's on the exact you got 30 years ago. It's on the exact same line as all of your health problems same line as all of your health problems right now.

right now. >> Mhm. >> Mhm. >> Mhm. >> How amazing is that? >> How amazing is that? >> That's incredible. >> That's incredible. >> Yeah. >> Yeah. >> Yeah.

>> Would the same sort of thing happen if >> Would the same sort of thing happen if somebody's had tooth extractions and somebody's had tooth extractions and it's been a bit clumsy and there's a bit it's been a bit clumsy and there's a bit of the root left in?

of the root left in? >> Mhm. >> Mhm. >> Mhm. >> Yep. >> Yep. >> Yep. >> Yeah. Any kind of pocket that's left >> Yeah. Any kind of pocket that's left behind, you know, so the cavitations or behind, you know, so the cavitations or

the root canals, it's it's all there.

the root canals, it's it's all there. >> Also metal amalgams. as well. The >> Also metal amalgams. as well. The especially, you know, like the mercury especially, you know, like the mercury amalgams amalgams amalgams >> because, you know, they say, "Oh, yeah, >> because, you know, they say, "Oh, yeah, it doesn't off gas." No, anytime you're it doesn't off gas." No, anytime you're drinking a hot beverage, anytime you're drinking a hot beverage, anytime you're um, you know, brushing your teeth, um, you know, brushing your teeth, anything like that, anything like that, >> it's offging.

>> it's offging. >> So, would you recommend then, bearing in >> So, would you recommend then, bearing in mind what you've just said about having mind what you've just said about having teeth pulled out, would you recommend teeth pulled out, would you recommend people get rid of their mercury fillins people get rid of their mercury fillins >> safely?

>> safely? >> safely? >> Yes, that's the key word, isn't it? >> Yes, that's the key word, isn't it? >> Safely. Yeah. Here's the thing cuz >> Safely. Yeah. Here's the thing cuz there's a lot of people that you know there's a lot of people that you know like I've I'm sure you've spoken to a like I've I'm sure you've spoken to a lot too, but there's so many people that lot too, but there's so many people that I've talked to where we do this I've talked to where we do this evaluation and we're like, "Oh, so you evaluation and we're like, "Oh, so you got your your mercury removed. Did they got your your mercury removed. Did they do it the it's called the smart method do it the it's called the smart method >> safe mercury amalgam removal technique >> safe mercury amalgam removal technique and you are gowned head to toe. You have and you are gowned head to toe. You have your own oxygen supply. Like there is no your own oxygen supply. Like there is no >> no chance.

>> no chance. >> Full hazmat style. >> Full hazmat style. >> Full hazmat. >> Full hazmat. >> Wow. >> Wow. >> Wow. And I always ask, "Did you get it?" And I always ask, "Did you get it?" Like, "Were you like that?" And they're Like, "Were you like that?" And they're like, "No." And like, "No." And >> the dentist was >> the dentist was >> Yeah. The dentist was, but not them.

>> Yeah. The dentist was, but not them. Right. And months later, all of a Right. And months later, all of a sudden, they have all these health sudden, they have all these health issues.

issues. issues. >> Mhm. >> Mhm. >> Mhm. >> So, very important to get it done >> So, very important to get it done properly. properly. properly. >> Gosh.

>> Gosh. >> Gosh. >> Yeah. >> Yeah. >> Yeah. >> And is there a sort of like >> And is there a sort of like pre-treatment, post treatment as well as pre-treatment, post treatment as well as the hazmat at the time?

the hazmat at the time? >> Mhm. I mean, I always encourage >> Mhm. I mean, I always encourage everybody to work with an integrative, everybody to work with an integrative, you know, medical professional because you know, medical professional because you want to do binders, you know, and you want to do binders, you know, and things like that. You want to make sure things like that. You want to make sure that your system is strong enough to that your system is strong enough to undergo that procedure.

undergo that procedure. >> Yeah. Yeah. >> Yeah. Yeah. >> Right. >> Right. >> Right. >> Imagine going in if you're already >> Imagine going in if you're already compromised.

compromised. compromised. >> Exactly. >> Exactly. >> Exactly. >> And taking a massive hit like that. >> And taking a massive hit like that. >> Mhm. >> Mhm.

>> Mhm. That's like me when I'm anizing people. That's like me when I'm anizing people. You know, if somebody comes in and You know, if somebody comes in and they just have no reserve because of the they just have no reserve because of the way they live their life and the the way they live their life and the the co-orbidities that they've got.

co-orbidities that they've got. >> Mhm. >> Mhm. >> Mhm. I'm more scared anesthetizing them than I'm more scared anesthetizing them than what I would be somebody even if they what I would be somebody even if they had exactly the same co-orbidities had exactly the same co-orbidities >> but they made an effort to look after >> but they made an effort to look after themselves which like you said it's themselves which like you said it's about mindset isn't it?

about mindset isn't it? >> Mhm. >> Mhm. >> Mhm. >> You know some people have decided well >> You know some people have decided well this is my lot these are my illnesses.

this is my lot these are my illnesses. Yeah. other people have decided, well, Yeah. other people have decided, well, these things are here, but you know, I these things are here, but you know, I want to do this, this, and this, and want to do this, this, and this, and this, and this, and this, and this, and do something about it.

do something about it. >> Much more happy Yeah. >> Much more happy Yeah. >> with them, obviously, because they're >> with them, obviously, because they're more likely to bounce back because more likely to bounce back because having an anesthetic having an anesthetic is an insult on your body, is an insult on your body, >> a physiological stress, but then to have >> a physiological stress, but then to have surgery is a huge physiological stress.

surgery is a huge physiological stress. Maybe it may be necessary. Do you know Maybe it may be necessary. Do you know what I mean? I'm not knocking it, but what I mean? I'm not knocking it, but yeah, you have to take all that into yeah, you have to take all that into account. And I'm hearing the sort of account. And I'm hearing the sort of similar vibes similar vibes with what you're talking about. It's with what you're talking about. It's amazing, isn't it?

amazing, isn't it? >> Definitely. >> Definitely. >> Definitely. >> Yeah. And it's interesting because it's >> Yeah. And it's interesting because it's the more we do this, the more we're the more we do this, the more we're understanding how that affects daily understanding how that affects daily life. And I have moved away from life. And I have moved away from friendships friendships friendships because they're letting life happen to because they're letting life happen to them and I can't sit by and watch it them and I can't sit by and watch it anymore, you know, versus like I'm anymore, you know, versus like I'm taking it by the reinss. I'm in charge taking it by the reinss. I'm in charge of everything. I'm in charge of, you of everything. I'm in charge of, you know, my household's the same way, my know, my household's the same way, my husband's on that same wavelength, my husband's on that same wavelength, my daughter's on that same wavelength. We daughter's on that same wavelength. We do not let that take us over passively.

do not let that take us over passively. We are in charge. We are in control. and We are in charge. We are in control. and we make our we make the things happen we make our we make the things happen for us. But then both even my husband for us. But then both even my husband he's also moving away from friends he's also moving away from friends because we're seeing that shift where because we're seeing that shift where people are like oh this is the cards up people are like oh this is the cards up and dealt and we're like that's not how and dealt and we're like that's not how life works but people don't have that life works but people don't have that mindset and they don't they can't get mindset and they don't they can't get their out of their own way and it's their out of their own way and it's really sad.

really sad. >> Yeah. Isn't it? >> Yeah. Isn't it? >> Yeah. >> Yeah. >> Yeah. >> Yeah. Isn't it? And I think a lot of >> Yeah. Isn't it? And I think a lot of that if we're going to go really deep that if we're going to go really deep here that starts with like the education here that starts with like the education system doesn't it? And it brings in system doesn't it? And it brings in obviously their how they were parented, obviously their how they were parented, what their whole environment was when what their whole environment was when they grew up. Oh, and then you could they grew up. Oh, and then you could really get me going and say you start really get me going and say you start chucking in big farmer and the food chucking in big farmer and the food industry and it just goes industry and it just goes >> I I didn't pack my tinfoil hat.

>> I I didn't pack my tinfoil hat. [laughter] [laughter] [laughter] We could do that together too one day. We could do that together too one day. >> That could be a whole other podcast.

>> That could be a whole other podcast. [laughter] [laughter] [laughter] >> Podcast. >> Podcast. >> Podcast. >> But also like don't be a victim of your >> But also like don't be a victim of your circumstances. Like you are in control circumstances. Like you are in control of your circumstances and everyone can of your circumstances and everyone can have the same thing but then like what have the same thing but then like what is your attitude and how are you taking is your attitude and how are you taking charge of life?

charge of life? >> Yeah. You could have somebody with the >> Yeah. You could have somebody with the same exact diagnosis. We've seen it same exact diagnosis. We've seen it countless times.

countless times. >> Some same exact diagnosis and two >> Some same exact diagnosis and two different mindsets, two different different mindsets, two different outcomes.

outcomes. outcomes. >> Absolutely. >> Absolutely. >> Absolutely. >> Yeah. Yeah. Yeah. Totally. So is there a >> Yeah. Yeah. Yeah. Totally. So is there a typical patient that you see or one typical patient that you see or one patient that is more of you know your patient that is more of you know your biggest volume of biggest volume of >> I mean well it's kind of changed a lot >> I mean well it's kind of changed a lot like when I first started I was doing a like when I first started I was doing a lot of sports injuries and things like lot of sports injuries and things like that or like chronic pain you know um that or like chronic pain you know um things like that you know backs knees things like that you know backs knees elbows um and then I started at the elbows um and then I started at the largest integrative cancer center in largest integrative cancer center in North America um ended up becoming a North America um ended up becoming a department head there and uh then asked department head there and uh then asked Natalie to come work with me and she Natalie to come work with me and she became my uh my co-head and we had an became my uh my co-head and we had an entire department underneath us and so entire department underneath us and so we ended up working with a lots of we ended up working with a lots of oncology patients a lot thousands and oncology patients a lot thousands and thousands and thousands thousands and thousands >> um over quite a few years and now so we >> um over quite a few years and now so we we continue we we see a lot of oncology we continue we we see a lot of oncology patients um we see actually a lot of ALS patients um we see actually a lot of ALS now as well now as well >> um ascent adaptation where we are at our >> um ascent adaptation where we are at our kind home base.

kind home base. >> Yeah, our main hub. Our home base. Um >> Yeah, our main hub. Our home base. Um kind of got a name uh for that a little kind of got a name uh for that a little bit. Um just because of one of our bit. Um just because of one of our clients um who's very clients um who's very >> uh it's public, so Johnny, [laughter] >> uh it's public, so Johnny, [laughter] you know, he's done a lot of videos and you know, he's done a lot of videos and everything. Um he was 32 everything. Um he was 32 >> two when he got diagnosed. 33, >> two when he got diagnosed. 33, >> I think. 33. and um he has not uh gotten >> I think. 33. and um he has not uh gotten worse in quite a few years now worse in quite a few years now >> and is doing very well.

>> and is doing very well. >> Yeah. And uh so we have quite a few >> Yeah. And uh so we have quite a few patients that and then Natalie and I uh patients that and then Natalie and I uh just established a department the just established a department the energetics department at Helixana energetics department at Helixana clinics and that's kind of a more clinics and that's kind of a more different you know different you know >> yeah it's different than we have >> yeah it's different than we have addressed in that level we have that addressed in that level we have that facility sees a lot of complex chronic facility sees a lot of complex chronic illness so lime mold you know and all illness so lime mold you know and all those other co- infections that go you those other co- infections that go you know Epstein barbesia all of at where it know Epstein barbesia all of at where it is your typical western medical facility is your typical western medical facility doesn't know how to address lime and doesn't know how to address lime and toxic mold infections. And so we've seen toxic mold infections. And so we've seen that at the clinic we were before, but that at the clinic we were before, but this is pretty much the majority of this is pretty much the majority of their volume here, their volume here, >> right?

>> right? >> right? >> And so the patients there are very >> And so the patients there are very cautious because they have MCCASTs and cautious because they have MCCASTs and so anything can upset that and set it so anything can upset that and set it off. So it is it is we we have to shift off. So it is it is we we have to shift our approach because we do not want to our approach because we do not want to upset the balance that they've been

you upset the balance that they've been you know progressing because any slight know progressing because any slight backst step is a huge backst step for backst step is a huge backst step for them sometimes. So we really have to them sometimes. So we really have to think differently and like really put think differently and like really put our clinical thinking hats on our clinical thinking hats on >> because it's and I love it because it >> because it's and I love it because it continues to push us as practitioners. I continues to push us as practitioners. I don't want to be sedentary and be like, don't want to be sedentary and be like, "Oh, great. We have this is our majority "Oh, great. We have this is our majority of our clients. I know exactly what to of our clients. I know exactly what to do." Even though even everyone's a do." Even though even everyone's a little bit different, but we're still little bit different, but we're still trying to address the same thing. So, trying to address the same thing. So, this really pushes us this really pushes us >> as professionals. And I just again, the >> as professionals. And I just again, the universe is like, you're going to see a universe is like, you're going to see a lot of this now, you're going to see a lot of this now, you're going to see a lot of that now, and always getting us lot of that now, and always getting us thinking and just really working hard at thinking and just really working hard at seeing what we can do best for all of seeing what we can do best for all of the patients that we do see.

the patients that we do see. >> Okay? >> Okay? >> Okay? >> Cuz that would be dull, wouldn't it? >> Cuz that would be dull, wouldn't it? doing the same thing day in day out.

doing the same thing day in day out. >> Yes. >> Yes. >> Yes. >> If I had the same treatment >> If I had the same treatment >> every single hour, >> every single hour, >> Mhm.

>> Mhm. >> Mhm. >> 8 hours, 9 hours a day, cuz I see about >> 8 hours, 9 hours a day, cuz I see about eight or nine patients a day, eight or nine patients a day, >> I would go nuts. [laughter] >> I would go nuts. [laughter] >> But, you know, the fact that you can >> But, you know, the fact that you can jump from a sports injury to, you know, jump from a sports injury to, you know, an oncology patient to a uh an oncology patient to a uh neurological, you know, case um to a neurological, you know, case um to a chronic pain issue. like it's something chronic pain issue. like it's something different every single hour, you know, different every single hour, you know, and you have to also that's why we and you have to also that's why we teach, you know, is because you have to teach, you know, is because you have to know how to address those different know how to address those different cases, right? Cuz you're not going to cases, right? Cuz you're not going to get the same exact get the same exact >> thing all the time and you have to >> thing all the time and you have to approach it differently.

approach it differently. >> So that's where it really comes in like >> So that's where it really comes in like you have to know what you're doing if you have to know what you're doing if you want to have the best outcome for you want to have the best outcome for your client. That's what we're trying to your client. That's what we're trying to prep our students who are taking our prep our students who are taking our course is they'll ask like oh how do I course is they'll ask like oh how do I treat Hashimoto's or how do I treat treat Hashimoto's or how do I treat cancer you're not treating the condition cancer you're not treating the condition you are treating the person you are treating the person >> and what systems are we trying to >> and what systems are we trying to support because this is speaking to the support because this is speaking to the body so what can the body do where does body so what can the body do where does it need the amplification where does it it need the amplification where does it need that oomph because the body will do need that oomph because the body will do the job but sometimes it just kind of the job but sometimes it just kind of gets stuck so where do We support the gets stuck so where do We support the systems. We do not teach how to treat X, systems. We do not teach how to treat X, Y, and Z condition because that's not Y, and Z condition because that's not how it is. And even if we had the same how it is. And even if we had the same person dayto day, person dayto day, >> they're not going to need the same >> they're not going to need the same support.

support. support. >> Very true. >> Very true. >> Yeah. Yeah. So, when you've got somebody >> Yeah. Yeah. So, when you've got somebody that's more complex clinically that's more complex clinically >> Mhm.

>> Mhm. >> Mhm. >> how do you get started with somebody >> how do you get started with somebody like that? Is is it obvious or again I like that? Is is it obvious or again I appreciate it's all going to be very appreciate it's all going to be very individual. Um but how would you address individual. Um but how would you address somebody complex?

somebody complex? >> I mean it depends on how they present >> I mean it depends on how they present >> right so if somebody comes in and I mean >> right so if somebody comes in and I mean let's just take you know one of our let's just take you know one of our cases where you know they come in and cases where you know they come in and they are in a very fragile state but they are in a very fragile state but also a very maybe anxious also a very maybe anxious >> state. I'm gonna work with that person >> state. I'm gonna work with that person much different than I would the person much different than I would the person who has maybe that exact same diagnosis who has maybe that exact same diagnosis >> but is cool as a cucumber, right? And >> but is cool as a cucumber, right? And so, first thing is going to be doing, so, first thing is going to be doing, okay, we're going to we're going to okay, we're going to we're going to approach this very sensitively, right?

approach this very sensitively, right? We're going to do probably some systemic We're going to do probably some systemic work. Get things calmed down. Get your work. Get things calmed down. Get your body not fighting me.

body not fighting me. >> Get it in a place where, okay, see, I'm >> Get it in a place where, okay, see, I'm speaking your same language. This is speaking your same language. This is nothing foreign. It's okay. get them nothing foreign. It's okay. get them calmed down, get the sympathetic, you calmed down, get the sympathetic, you know, and parasympathetic balanced, know, and parasympathetic balanced, >> and then we can start to address, right?

>> and then we can start to address, right? Versus if somebody comes in, let's say, Versus if somebody comes in, let's say, with a sports injury or something like with a sports injury or something like that, I'm going to approach that that, I'm going to approach that completely different, you know, I'm completely different, you know, I'm going to go for that injury, going to go for that injury, >> right? And then maybe work on their >> right? And then maybe work on their system.

system. system. >> But it just it's all about how that >> But it just it's all about how that person presents. And that's where you person presents. And that's where you have to have the tools to know, oh, have to have the tools to know, oh, okay, okay, okay, >> priorities. I need to address this >> priorities. I need to address this first, then I can start to address this first, then I can start to address this this system. then we can go after this this system. then we can go after this problem, right?

problem, right? >> And I think also important is being able >> And I think also important is being able to speak about what is going on, to speak about what is going on, educating your client educating your client >> so they have less of an anxiety or a >> so they have less of an anxiety or a fear about what's going to happen or fear about what's going to happen or what can happen. And one of my favorite what can happen. And one of my favorite quotes of all time is accredited to quotes of all time is accredited to Albert Einstein and I'm sure the Albert Einstein and I'm sure the internet is going to probably believe internet is going to probably believe you like, oh no, it was this uh but if you like, oh no, it was this uh but if you can't explain it simply, you don't you can't explain it simply, you don't understand it well enough.

understand it well enough. >> Yes. I've heard that um statement before >> Yes. I've heard that um statement before and I agree entirely too. and I agree entirely too.

>> And that's what we try to do with our >> And that's what we try to do with our program is getting our students to program is getting our students to understand it so they can speak about understand it so they can speak about it.

it. it. >> And we have them actually practice speak >> And we have them actually practice speak about it. Explain what's happening. Try about it. Explain what's happening. Try that because we want them to be armed to that because we want them to be armed to be able to feel confident in explaining be able to feel confident in explaining exactly what's happening even in the exactly what's happening even in the simplest terms.

simplest terms. >> Yeah. and also explaining the difference >> Yeah. and also explaining the difference >> because so many people, you know, think >> because so many people, you know, think frequency is frequency is frequency, frequency is frequency is frequency, right? So they're like, oh, this is like right? So they're like, oh, this is like a rife machine a rife machine >> or oh, this is like a 10 unit, right?

>> or oh, this is like a 10 unit, right? Totally different things, Totally different things, >> right? >> right? >> right? >> You know, and so that's part of what we >> You know, and so that's part of what we teach, you know, is understanding this teach, you know, is understanding this is what this is, you know, this is PEMF, is what this is, you know, this is PEMF, this is photobiomodulation, this is this is photobiomodulation, this is rife, this is tens, these are the rife, this is tens, these are the differences, right? Because you need to differences, right? Because you need to understand what you do and you need to understand what you do and you need to understand the entire field cuz it's not understand the entire field cuz it's not about just understanding one device.

about just understanding one device. It's understanding how they all work It's understanding how they all work together because they all have their together because they all have their role role role >> of course >> of course >> right they all have their role >> right they all have their role >> but you have to understand the whole >> but you have to understand the whole field which is why you know we created field which is why you know we created our biorequency specialist certification our biorequency specialist certification which is basically an entire which is basically an entire foundational knowledge of frequency foundational knowledge of frequency medicine as a whole.

medicine as a whole. >> Oh >> Oh >> Oh >> and so our students they get that >> and so our students they get that education as well. It's not just SCN R, education as well. It's not just SCN R, you know, and in the states we teach you know, and in the states we teach biom modulator. It's not just biom modulator. It's not just biomodulator. We want our therapists to biomodulator. We want our therapists to be incredibly well educated so that when be incredibly well educated so that when their client asks, well, how is this their client asks, well, how is this different from a rife machine? They can different from a rife machine? They can tell them exactly.

tell them exactly. >> Mhm. >> Mhm. >> Mhm. >> Yeah. That's got to build up credibility >> Yeah. That's got to build up credibility and trust with the individual client, and trust with the individual client, hasn't it?

hasn't it? >> Yeah. >> Yeah. >> Yeah. >> Yeah. >> Yeah. >> Yeah. >> We want our therapists to be well >> We want our therapists to be well equipped. equipped.

equipped. >> Yes. >> Yes. >> Yes. >> Right. >> Right. >> Right. >> Yeah. >> Yeah. >> Yeah. >> Because we need to get people better. >> Because we need to get people better.

>> It's not competition. You know, people >> It's not competition. You know, people are like, "Why are you guys doing this? are like, "Why are you guys doing this?

You're creating competition." It's like, You're creating competition." It's like, "No, we're not." There are so many "No, we're not." There are so many people in this world that need people in this world that need >> this, you know, that need help.

>> this, you know, that need help. >> There's plenty to go around, right? And >> There's plenty to go around, right? And the people who gatekeep the people who gatekeep >> information, >> information, >> information, >> you know, and out of whatever, you know, >> you know, and out of whatever, you know, whether it's insecurity or whatever it whether it's insecurity or whatever it is, is, is, >> no, there's there's plenty there's >> no, there's there's plenty there's plenty of sick people in this world plenty of sick people in this world right now. We need an army.

right now. We need an army. >> [laughter] >> [laughter] >> [laughter] >> Yes, >> Yes, >> Yes, >> we need an army. So, that's what we're >> we need an army. So, that's what we're about.

about. about. >> Competent therapists, >> Competent therapists, >> people that do this work justice. >> people that do this work justice. >> Cuz if someone gets a treatment and that >> Cuz if someone gets a treatment and that therapist isn't competent, they're going therapist isn't competent, they're going to be like, "Oh, that doesn't work for to be like, "Oh, that doesn't work for me." me." me." >> Exactly.

>> Exactly. >> Exactly. >> Yep. And they'll dismiss it completely >> Yep. And they'll dismiss it completely then. And yet having the correct then. And yet having the correct therapist could well have therapist could well have >> helped them immensely. Exactly.

>> helped them immensely. Exactly. >> Exactly. And that's where because we've >> Exactly. And that's where because we've done a lot of trainings, right? And done a lot of trainings, right? And we've had our our girls, you know, our we've had our our girls, you know, our our team, we've had them do multiple our team, we've had them do multiple trainings as well, trainings as well, >> not just ours.

>> not just ours. >> Yeah. Not just ours, cuz we want them to >> Yeah. Not just ours, cuz we want them to see, you know, the differences. Um, and see, you know, the differences. Um, and so it's like so it's like >> that's where you can't just >> that's where you can't just put your hands on somebody, you know, put your hands on somebody, you know, with this device running and expect it with this device running and expect it to work magic. Like sure, it's going to to work magic. Like sure, it's going to be beneficial no matter what, be beneficial no matter what, >> but you need to do it in the best >> but you need to do it in the best clinical way clinical way >> because then you get the best outcome.

>> because then you get the best outcome. And if you don't understand that and if And if you don't understand that and if you're really just treating somebody you're really just treating somebody with, you know, passively like that, with, you know, passively like that, you're doing a disservice to your you're doing a disservice to your client.

client. client. >> Yes, you are. >> Yes, you are. >> Yeah, that's a really good point. >> Yeah, that's a really good point. >> Yeah. And that's what it's all about, >> Yeah. And that's what it's all about, >> right? This field is not about money. If >> right? This field is not about money. If you are in this field for money, get out you are in this field for money, get out and get out now. [laughter] and get out now. [laughter] >> Yeah.

>> Yeah. >> Yeah. >> Because the people who And it's funny, >> Because the people who And it's funny, you've seen it a lot. I don't know you you've seen it a lot. I don't know you guys over here, but we've seen it a lot guys over here, but we've seen it a lot in the States, especially over the last in the States, especially over the last year. Huge institutions year. Huge institutions that have been in this field for decades that have been in this field for decades >> that when they turned and it was more >> that when they turned and it was more about money than it was about the about money than it was about the patient. Yeah.

patient. Yeah. >> They crumble and we're talking huge >> They crumble and we're talking huge institutions, huge names. institutions, huge names. >> They lose the integrity and >> They lose the integrity and >> Yeah.

>> Yeah. >> Yeah. >> Yeah. You lose that integrity and you >> Yeah. You lose that integrity and you make it about money, you're going to make it about money, you're going to lose everything.

lose everything. >> Yep. >> Yep. >> Yep. >> Right. And so I've always said and I >> Right. And so I've always said and I mean I've been I lived in a garage, you mean I've been I lived in a garage, you know, [laughter] like at my at my know, [laughter] like at my at my brother's house, you know, it was just brother's house, you know, it was just like I know that if I do the right like I know that if I do the right service for my client, money will come.

service for my client, money will come. >> Yes. >> Yes. >> Yes. >> Right. You do the right thing, money >> Right. You do the right thing, money will come. Especially in the energetics will come. Especially in the energetics field.

field. field. >> Yeah. It's all about energy. >> Yeah. It's all about energy. >> Yeah. Isn't it >> Yeah. Isn't it >> right? So, [snorts] doing the right >> right? So, [snorts] doing the right thing always.

thing always. >> Yeah. You weren't just living in a >> Yeah. You weren't just living in a garage when I met you. You were also garage when I met you. You were also working the night shift while going to working the night shift while going to school during the day.

school during the day. >> Yes, I was. Yeah. I was actually I was >> Yes, I was. Yeah. I was actually I was going to school during the day. I was going to school during the day. I was then treating clients.

then treating clients. >> Um and then I was working as an >> Um and then I was working as an overnight security guard overnight security guard >> at the same time. So, I would go to >> at the same time. So, I would go to work. I

would get up Friday morning. I work. I would get up Friday morning. I would go to school. I would get up at would go to school. I would get up at like 5. I would go to school and then I like 5. I would go to school and then I wouldn't get home until about 7:00 a.m.

wouldn't get home until about 7:00 a.m. the next morning to go to sleep. And I the next morning to go to sleep. And I was up that entire time. Not healthy.

was up that entire time. Not healthy. [laughter] Not healthy, but that's what [laughter] Not healthy, but that's what I had to do. And I had to do. And >> you have to do that grind.

>> you have to do that grind. >> Yeah. >> Yeah. >> Yeah. >> Yeah. Yeah. >> Yeah. Yeah. >> To get where you're going. >> To get where you're going. >> Exactly.

>> Exactly. >> Exactly. >> Oh, you do, don't you? >> Oh, you do, don't you? >> Thank god I don't have to do that >> Thank god I don't have to do that anymore. Huh.

anymore. Huh. >> Yeah. Yeah. [laughter] >> Yeah. Yeah. [laughter] You know, I just fly in and out of You know, I just fly in and out of countries for a week and work and countries for a week and work and non-stop and then go back home to work.

non-stop and then go back home to work. >> Yeah, it's fine. That's much better work >> Yeah, it's fine. That's much better work though. [laughter] So, though. [laughter] So, >> it is much more fun.

>> it is much more fun. >> You must feel much more productive as >> You must feel much more productive as well. well. well. >> Definitely. Yeah. >> Definitely. Yeah.

>> I know you're building your army >> I know you're building your army literally, aren't you? By coming over literally, aren't you? By coming over here and training people.

here and training people. >> That's the goal. Yeah, >> That's the goal. Yeah, >> we love I mean, there's something very >> we love I mean, there's something very special about the UK, you know, and I um special about the UK, you know, and I um I was over here when I was 17. I used to I was over here when I was 17. I used to live in Wood Green.

live in Wood Green. >> Oh, really? >> Oh, really? >> Yeah. And so, uh, actually, uh, Theo >> Yeah. And so, uh, actually, uh, Theo Cosmo and I were neighbors. You know, Cosmo and I were neighbors. You know, when we just found out, we're like, we when we just found out, we're like, we were in the same neighborhood. How crazy were in the same neighborhood. How crazy is that? Um, but yeah, you know, so like is that? Um, but yeah, you know, so like the UK just has a very special place in the UK just has a very special place in my heart. And this is where I did all of my heart. And this is where I did all of my training, you know, after I did my my training, you know, after I did my initial training in the States. And I initial training in the States. And I just I want to do these therapists just I want to do these therapists justice. Mhm.

justice. Mhm. >> And you know there's not an institution >> And you know there's not an institution that's doing that's doing >> in my book quality training right now >> in my book quality training right now and I think that this is a modality that and I think that this is a modality that that deserves that and so that's why we that deserves that and so that's why we are going to be here four times a year.

are going to be here four times a year. >> Brilliant. >> Brilliant. >> Brilliant. >> Doing training. >> Doing training. >> Would you like to see it over time that >> Would you like to see it over time that you can train people up to teach your you can train people up to teach your course?

course? course? >> Yes. >> Yes. >> Yes. >> Yes. That is the goal. >> Yes. That is the goal. >> We want to clone ourselves basically. >> We want to clone ourselves basically.

Actually, we have a a funny saying. We Actually, we have a a funny saying. We are overcommitted, undercloned. are overcommitted, undercloned. [laughter] [laughter] [laughter] >> But yes, we want to [snorts] spread this >> But yes, we want to [snorts] spread this because if you try to bottleneck because if you try to bottleneck something, you know, you try to control something, you know, you try to control it, you're not going to succeed. Right?

it, you're not going to succeed. Right? I hope that that is my legacy when I I hope that that is my legacy when I leave this planet. leave this planet.

>> That we have created an army of >> That we have created an army of frequency therapists frequency therapists >> all throughout the world and that people >> all throughout the world and that people are getting better that people don't are getting better that people don't have to deal with all these chronic have to deal with all these chronic diseases, chronic illnesses, and they diseases, chronic illnesses, and they have tools that are good for them and have tools that are good for them and not partially killing them.

not partially killing them. >> I I want this to not be their last stop. >> I I want this to not be their last stop. >> I want this to be their first stop, >> I want this to be their first stop, >> right? Cuz so often we have people that >> right? Cuz so often we have people that are like, "Oh, I've tried everything." are like, "Oh, I've tried everything." And then they stumble upon what we are And then they stumble upon what we are doing.

doing. doing. >> Yeah. [clears throat] >> Yeah. [clears throat] >> And I want people to be like, "Oh my >> And I want people to be like, "Oh my gosh, I'm not feeling well or I have gosh, I'm not feeling well or I have something or like I just need to make something or like I just need to make sure everything's working properly. Let sure everything's working properly. Let me go get my session." Like people do me go get my session." Like people do with massage. Like they have their with massage. Like they have their maintenance massage, but they should be maintenance massage, but they should be really doing their maintenance really doing their maintenance frequency.

frequency. frequency. >> Yeah, that makes a lot of sense. >> Yeah, that makes a lot of sense. That makes a lot of sense cuz it's That makes a lot of sense cuz it's It's really is about addressing the It's really is about addressing the whole person, isn't it?

whole person, isn't it? >> Yeah. >> Yeah. >> Yeah. >> And yes, they may well have ABC wrong >> And yes, they may well have ABC wrong with them, with them, >> but it's all within the same piece of >> but it's all within the same piece of skin.

skin. skin. >> Well, and that's why we work with a lot >> Well, and that's why we work with a lot of like we have a huge network of of like we have a huge network of integrative, you know, doctors and, you integrative, you know, doctors and, you know, practitioners of all sorts that we know, practitioners of all sorts that we work with because, you know, it's like work with because, you know, it's like >> it's all just a little piece, >> it's all just a little piece, >> you know, so there's nothing that is a >> you know, so there's nothing that is a you know, all-encompassing, you know, you know, all-encompassing, you know, one hit. Okay, you're all fixed now, one hit. Okay, you're all fixed now, right? You have to look at everything.

right? You have to look at everything. You know, I can do so much for a person, You know, I can do so much for a person, right? I can I can help them, but if right? I can I can help them, but if they're not going to also do the work at they're not going to also do the work at home, maybe, home, maybe, >> you know, I can help to reactivate, >> you know, I can help to reactivate, let's just say, you know, an area that let's just say, you know, an area that hasn't been able to to move, but if you hasn't been able to to move, but if you don't exercise and rebuild that muscle, don't exercise and rebuild that muscle, like, I can't do that for you.

like, I can't do that for you. >> Yeah. >> Yeah. >> Yeah. >> Right. or or you know we can do all the >> Right. or or you know we can do all the u biohacking all of the devices all of u biohacking all of the devices all of the things but if you're going to go eat the things but if you're going to go eat McDonald's like it's probably not going McDonald's like it's probably not going to be the best right you know so it's to be the best right you know so it's it's all-encompassing and I always it's all-encompassing and I always encourage people of course you need to encourage people of course you need to address the electrical you need to address the electrical you need to address

theformational but also then address theformational but also then yeah you do need to address the yeah you do need to address the biological and chemical and that's where biological and chemical and that's where working with an integrative professional working with an integrative professional comes in comes in >> because look at that root cause make >> because look at that root cause make sure everything's functioning properly sure everything's functioning properly make sure that you have all of the make sure that you have all of the building blocks for yourselves. Make building blocks for yourselves. Make sure that you're taking good sure that you're taking good supplements, drinking good water, supplements, drinking good water, hydrogen water. Uh, you know, of hydrogen water. Uh, you know, of [laughter] course.

[laughter] course. >> Yeah, exactly. You know, so it's like >> Yeah, exactly. You know, so it's like it's all a piece. It's all a piece. So, it's all a piece. It's all a piece. So, we're just one piece. But honestly, I we're just one piece. But honestly, I think that think that >> the electrical andformational layer of >> the electrical andformational layer of the body. That's the foundation that has the body. That's the foundation that has to come first because if you don't have to come first because if you don't have the energy, nothing else is going to the energy, nothing else is going to happen.

happen. happen. >> Yeah. Sure. Everything's going to be >> Yeah. Sure. Everything's going to be stuck, isn't it? Be like sledged up stuck, isn't it? Be like sledged up pipes.

pipes. pipes. >> Yeah. Mhm. >> Yeah. Mhm. >> Yeah. We have people, they're doing all >> Yeah. We have people, they're doing all the IVs, all the medications, all the the IVs, all the medications, all the supplements, all the things, right?

supplements, all the things, right? >> And it's not really doing great. >> And it's not really doing great. >> But when they start incorporating the >> But when they start incorporating the energetics, when they start addressing energetics, when they start addressing their voltage, addressing that their voltage, addressing that frequency, addressing that information frequency, addressing that information of the body, that's when things start to of the body, that's when things start to shift.

shift. shift. >> Yeah. >> Yeah. >> Yeah. >> So, huge huge layer. >> So, huge huge layer. >> Yeah. >> Yeah. >> Yeah. And do you And do you find that you're getting a good find that you're getting a good reception from both the sort of clinical reception from both the sort of clinical medics as well as the more integrated medics as well as the more integrated >> now? Yeah. Well, it's funny cuz when I >> now? Yeah. Well, it's funny cuz when I first started, you know, like I've been first started, you know, like I've been doing this for 16 years now, going on 17 doing this for 16 years now, going on 17 actually soon, which is crazy.

actually soon, which is crazy. >> Um, >> Um, >> Um, >> when I first started, people were like, >> when I first started, people were like, "What is this woo woo thing that you're "What is this woo woo thing that you're that you're doing?" And now everybody is that you're doing?" And now everybody is like, "Oh, frequency, right?" You know, like, "Oh, frequency, right?" You know, we've like, "Welcome to the club.

we've like, "Welcome to the club. Finally, you're here." Um, but I think Finally, you're here." Um, but I think that's the part that, you know, that I that's the part that, you know, that I appreciate Natalie, myself, you know, appreciate Natalie, myself, you know, and our team, we focus so much on is the and our team, we focus so much on is the scientific backing.

scientific backing. >> You know, for me, my whole >> You know, for me, my whole my whole goal is to bring the science to my whole goal is to bring the science to the energetics field, you know, and the energetics field, you know, and speak about it in a way that is speak about it in a way that is scientifically validated.

scientifically validated. >> Yes. Because so many people talk about, >> Yes. Because so many people talk about, you know, oh, the energy and the you know, oh, the energy and the frequency that no, let's talk about the frequency that no, let's talk about the physiology of it. Let's talk about the physiology of it. Let's talk about the science of it and why it's actually science of it and why it's actually effective. So, I think when you bring effective. So, I think when you bring that aspect to it, people are like, "Oh, that aspect to it, people are like, "Oh, >> oh, okay.

This is legit." You know, >> oh, okay. This is legit." You know, like, "Yeah, this isn't woowoo. This is like, "Yeah, this isn't woowoo. This is literally neuroscience." literally neuroscience." >> This is how your nervous system works.

>> This is how your nervous system works. Yeah. Yeah. Yeah. >> Yeah. There's research, there's books, >> Yeah. There's research, there's books, this has been studied for over a century this has been studied for over a century on how it it, you know, your body is on how it it, you know, your body is electric and how it heals with that.

electric and how it heals with that. >> Western medicine uses it a little bit, >> Western medicine uses it a little bit, but they have not fully embraced or but they have not fully embraced or encompassed.

encompassed. encompassed. >> Mhm. >> Mhm. >> Mhm. >> And that is my mission. >> And that is my mission. >> Is to take the very best of Western >> Is to take the very best of Western medicine because there are some good medicine because there are some good bits.

bits. bits. >> Yeah, absolutely. >> Yeah, absolutely. >> Very definitely. We need a lot of the >> Very definitely. We need a lot of the clinical stuff that we've got available clinical stuff that we've got available to us now. And I'm not saying we should to us now. And I'm not saying we should we should dismiss that. I'm just saying we should dismiss that. I'm just saying we should bring things like scanner, we should bring things like scanner, like homeopathy, like hyperbaric oxygen, like homeopathy, like hyperbaric oxygen, like intravenous supplements and like intravenous supplements and hydrogen water. It should all be part of hydrogen water. It should all be part of the same package and available without the same package and available without any bias or prejudice.

any bias or prejudice. >> Yeah. Exactly. >> Yeah. Exactly. >> Which all there's there's room for >> Which all there's there's room for everything. everything.

everything. >> There is room for everybody, >> There is room for everybody, >> right? >> right? >> right? >> Yeah. Western medicine is important in >> Yeah. Western medicine is important in some aspects. Like I personally I really some aspects. Like I personally I really think that there should be acute think that there should be acute medicine and chronic medicine.

medicine and chronic medicine. >> Acute medicine is when oh you just got >> Acute medicine is when oh you just got in a car accident and we need to put you in a car accident and we need to put you back together and do surgery and all back together and do surgery and all that. Okay. Yeah. That's that's really that. Okay. Yeah. That's that's really important, right? Or you have a major important, right? Or you have a major infection that we need to get infection that we need to get antibiotics. There's times absolutely.

antibiotics. There's times absolutely. >> But when you have something chronic, >> But when you have something chronic, >> that's where Western medicine tends to >> that's where Western medicine tends to not do so great, not do so great, >> right? because they're in symptom >> right? because they're in symptom management mode and not root cause.

management mode and not root cause. >> Yes. >> Yes. >> Yes. >> Yeah. It's all about root cause. >> Yeah. It's all about root cause. >> We're wearing the same hat here.

>> We're wearing the same hat here. >> Absolutely. >> Absolutely. >> Absolutely. >> And also, >> And also, [laughter] yes, the point, [laughter] yes, the point, >> but it it's prevention. It's lifestyle.

>> but it it's prevention. It's lifestyle. It's how we're doing the things. It's how we're doing the things. >> And unfortunately, there's so much >> And unfortunately, there's so much that's bombarding us that's bombarding us >> from just as simple as the food we eat.

>> from just as simple as the food we eat. >> Yeah. >> Yeah. >> Yeah. >> That is just making people ill. >> That is just making people ill. >> Yeah. you know, and making the choices >> Yeah. you know, and making the choices of what am I putting in my body? How am of what am I putting in my body? How am I fueling myself? I often use the I fueling myself? I often use the example of like if you have a very example of like if you have a very expensive

sports car, are you going to expensive sports car, are you going to put the cheap petrol in it or the put the cheap petrol in it or the expensive petrol in it? Right? So, you expensive petrol in it? Right? So, you want to put in your body the same thing.

want to put in your body the same thing. You want to put the quality items in You want to put the quality items in there so it can use it to function, there so it can use it to function, right? And if we start with the basics right? And if we start with the basics of how we're fueling ourselves with of how we're fueling ourselves with frequency, with the building blocks of frequency, with the building blocks of food, we don't have to go down that food, we don't have to go down that lane. But also emotions. Emotions play a lane. But also emotions. Emotions play a big part. We have not big part. We have not >> done our society justice of teaching our >> done our society justice of teaching our children how to, you know, stress children how to, you know, stress manage, take that sympathetic off and manage, take that sympathetic off and put ourselves back into parasympathetic.

put ourselves back into parasympathetic. And there has been just this systemic And there has been just this systemic way of just keeping us busy. Yeah. and way of just keeping us busy. Yeah. and busy and busy and I tease ours tease busy and busy and I tease ours tease everybody myself included we add more everybody myself included we add more conveniences to our life but it's just conveniences to our life but it's just making us sicker because the moment making us sicker because the moment we're like oh my gosh I've added 10 we're like oh my gosh I've added 10 minutes to my day because I've done minutes to my day because I've done something more convenient I don't take something more convenient I don't take that 10 minutes for myself and make it that 10 minutes for myself and make it better I take that 10 minutes I cram better I take that 10 minutes I cram something else in something else in >> yes exactly yeah >> yes exactly yeah >> because society [laughter] condition >> because society [laughter] condition users isn't it to the more you do the users isn't it to the more you do the better it is better it is >> exactly >> exactly >> exactly >> you know achieve achieve achieve to >> you know achieve achieve achieve to achieve. No.

achieve. No. >> And it's breaking us down. >> And it's breaking us down. >> Achieving is great, but you're going to >> Achieving is great, but you're going to burn out, aren't you? There's going to burn out, aren't you? There's going to be nothing left. And what good is that be nothing left. And what good is that to anybody?

to anybody? >> Exactly. It's okay to rest. That's >> Exactly. It's okay to rest. That's actually good actually good >> to rest. Yeah. And that's I mean, that's >> to rest. Yeah. And that's I mean, that's something like Natalie and we're not something like Natalie and we're not perfect, you know, by any means, right?

perfect, you know, by any means, right? None of us are, you know. So, None of us are, you know. So, >> we try our best. >> we try our best. >> We have to, you know, remind ourselves >> We have to, you know, remind ourselves too, like, hold on, too, like, hold on, >> okay, running a million miles an hour. I >> okay, running a million miles an hour. I need to take a day for myself. You know, need to take a day for myself. You know, I'm gonna go get my massage. I'm gonna I'm gonna go get my massage. I'm gonna go do some therapies. You know, I'm go do some therapies. You know, I'm gonna do some some red light at a scent gonna do some some red light at a scent or, you know, when I'm over here at a at or, you know, when I'm over here at a at Cosmo.

Cosmo. Cosmo. >> Yes. [laughter] >> Yes. [laughter] >> You know, at a Cosmo clinic. Um, but >> You know, at a Cosmo clinic. Um, but yeah, you need to That's part of, you yeah, you need to That's part of, you know, doing good for yourself.

know, doing good for yourself. >> It is. That's part of your job. >> It is. That's part of your job. >> It is. And you know when you said about >> It is. And you know when you said about putting good stuff in, friend of mine putting good stuff in, friend of mine was telling me literally just yesterday was telling me literally just yesterday um that she was looking for Easter eggs um that she was looking for Easter eggs >> for her kids recently and she's looking >> for her kids recently and she's looking at the ingredients cuz she's conscious at the ingredients cuz she's conscious of what she eats and she couldn't find a of what she eats and she couldn't find a single one of them that actually had single one of them that actually had chocolate. [clears throat] chocolate. [clears throat] >> It was all oils and emulsifiers.

>> It was all oils and emulsifiers. >> Mhm. Mhm. Am I crazy? >> Mhm. Mhm. Am I crazy? >> Chocolate in a chocolate Easter egg. >> Chocolate in a chocolate Easter egg.

What is the world coming [laughter] to? What is the world coming [laughter] to? I mean, that's a really base level I mean, that's a really base level example to me.

example to me. >> Yeah, it's crazy. Well, the fact that >> Yeah, it's crazy. Well, the fact that you have to you have to >> hunt >> hunt >> hunt >> for healthy, clean food.

>> for healthy, clean food. >> Mhm. >> Mhm. >> Mhm. >> Right. That you have to read labels so >> Right. That you have to read labels so carefully, you know, and every time carefully, you know, and every time something starts getting, you know, something starts getting, you know, attention like an ingredient, they just attention like an ingredient, they just changed the name.

changed the name. >> Yes. >> Yes. >> Yes. >> So now it's something else. you know, >> So now it's something else. you know, same thing, but now they're just calling same thing, but now they're just calling it something else. You have to be so it something else. You have to be so careful about what you're putting in careful about what you're putting in your body, you know, your body, you know, >> and so even with, you know, in the US, >> and so even with, you know, in the US, my goodness, we have I mean, we have it my goodness, we have I mean, we have it worse than you guys, you know, we have a worse than you guys, you know, we have a lot a lot less regulation as far as, you lot a lot less regulation as far as, you know, there's so many things Yeah. so know, there's so many things Yeah. so many things that are allowed in our food many things that are allowed in our food that you guys don't allow, that you guys don't allow, >> you know, and so we're super careful >> you know, and so we're super careful about what we, [clears throat] about what we, [clears throat] >> you know, what we put in our bodies >> you know, what we put in our bodies >> essentially. I like to I mean you can >> essentially. I like to I mean you can only do so much, right? You know, only do so much, right? You know, sometimes you have to you're traveling, sometimes you have to you're traveling, whatever. But I mean, general rule of whatever. But I mean, general rule of thumb, I feel like is thumb, I feel like is >> if it didn't exist 100 years ago, it's >> if it didn't exist 100 years ago, it's probably not a good idea to to eat it, probably not a good idea to to eat it, right?

right? right? >> Yeah. >> Yeah. >> Yeah. >> So, >> So, >> So, >> yeah. >> yeah. >> yeah. >> Oh, that sounds perfectly reasonable to >> Oh, that sounds perfectly reasonable to me. Right.

me. Right. >> Right. >> Right. >> Right. >> Which means beer is on the list cuz >> Which means beer is on the list cuz that's been around a long time.

that's been around a long time. >> Oh, great. So, >> Oh, great. So, >> we're safe. [laughter] We can still have >> we're safe. [laughter] We can still have a little one.

a little one. >> Oh, god. [clears throat] Yeah. Yeah. >> Oh, god. [clears throat] Yeah. Yeah. I've started buying um more organic food I've started buying um more organic food where I can.

where I can. >> Mhm. >> Mhm. >> Mhm. >> I mean, I know it's really pricey, but >> I mean, I know it's really pricey, but if I'm only just buying for me if I'm only just buying for me >> Mhm.

>> Mhm. >> Mhm. >> and not for the whole family cuz they no >> and not for the whole family cuz they no longer live at home, so I can do that longer live at home, so I can do that now. Um then it's made it more now. Um then it's made it more affordable.

affordable. affordable. >> Mhm. >> Mhm. >> Mhm. >> And you know, one my youngest, she's >> And you know, one my youngest, she's with a a chap who really loves to cook with a a chap who really loves to cook and so they cook from fresh, which is and so they cook from fresh, which is far better than buying processed. And far better than buying processed. And I'm hoping eventually as they sort of I'm hoping eventually as they sort of settle in and you know move up the settle in and you know move up the career ladders or whatever they're going career ladders or whatever they're going to be doing that they can start buying to be doing that they can start buying organic stuff

as well. But already organic stuff as well. But already they're doing a lot better than a lot of they're doing a lot better than a lot of people.

people. people. >> Yeah. >> Yeah. >> Yeah. >> Mhm. >> Mhm. >> Mhm. >> Cuz they're cooking for themselves. >> Cuz they're cooking for themselves. >> Yeah. That's good. But >> Yeah. That's good. But >> it's sad that's the anomaly is cooking >> it's sad that's the anomaly is cooking whole foods and fresh foods.

whole foods and fresh foods. >> Yeah. Yeah. And also too, I mean it's >> Yeah. Yeah. And also too, I mean it's funny because society, you know, if you funny because society, you know, if you eat what societyy's telling you to eat, eat what societyy's telling you to eat, you know, it's all these carbs and all you know, it's all these carbs and all these, you know, empty carbs and all these, you know, empty carbs and all these things, you find yourself being so these things, you find yourself being so much more hungry.

much more hungry. >> Yes. >> Yes. >> Yes. >> Yes. >> Yes. >> Yes. >> Right. Whereas, if you have good >> Right. Whereas, if you have good protein, protein, protein, >> you know, you have good quality food, >> you know, you have good quality food, you're not as hungry. You don't you you're not as hungry. You don't you don't need a lot, honestly. You really don't need a lot, honestly. You really don't. And so you'll actually end up don't. And so you'll actually end up eating less if you eat good quality, you eating less if you eat good quality, you know, and especially with protein.

know, and especially with protein. Actually, that's a huge thing that Actually, that's a huge thing that people are lacking is people are not people are lacking is people are not eating enough protein.

eating enough protein. >> And you know, it's so funny there's such >> And you know, it's so funny there's such an attack on meat particularly. Um, but an attack on meat particularly. Um, but you actually get so many vitamins and you actually get so many vitamins and minerals from meat.

minerals from meat. >> Mhm. >> Mhm. >> Mhm. >> So many, you know. >> So many, you know. >> Absolutely. I mean, people said to me >> Absolutely. I mean, people said to me like, "Oh, what have we got for lunch?

like, "Oh, what have we got for lunch? I've got a salad." And so they just I've got a salad." And so they just picture green picture green >> leaves. Yeah, there's green leaves in my >> leaves. Yeah, there's green leaves in my salad. There really is. But there's also salad. There really is. But there's also red peppers, carrots, two hardboiled red peppers, carrots, two hardboiled eggs, some mackerel, or some other eggs, some mackerel, or some other cooked meat, and a small portion of cooked meat, and a small portion of cheese.

cheese. cheese. >> Yeah. >> Yeah. >> Yeah. >> Yeah. I'm cramming as much protein in >> Yeah. I'm cramming as much protein in there there there >> as I can, but it's still a salad.

>> as I can, but it's still a salad. >> Yeah. Protein, fat, like >> Yeah. Protein, fat, like >> it's good things. When we traveled to >> it's good things. When we traveled to Japan for a conference last year, a lot Japan for a conference last year, a lot of the breakfastes were like breads, of the breakfastes were like breads, little croissants or something, and little croissants or something, and Danielle and I are like, Danielle and I are like, >> "We need eggs." >> "We need eggs." >> Yeah. [laughter] >> Yeah. [laughter] >> So, the only place we could find that we >> So, the only place we could find that we knew we could get eggs, there was a knew we could get eggs, there was a Denny's across from our hotel. We're Denny's across from our hotel. We're like, like, like, >> not not necessarily our particular >> not not necessarily our particular choice to eat, but we know we can get choice to eat, but we know we can get some eggs there and some some bacon or some eggs there and some some bacon or something protein wise. [laughter] something protein wise. [laughter] >> Yeah. I don't really eat bread >> Yeah. I don't really eat bread [clears throat] very often. Like I mean [clears throat] very often. Like I mean rarely, you know, but it's like rarely, you know, but it's like >> Yeah. In Japan, it was funny. Every >> Yeah. In Japan, it was funny. Every morning it was like this type of toast morning it was like this type of toast or this type of toast. I was just like, or this type of toast. I was just like, >> I don't want that.

>> I don't want that. >> No. >> No. >> No. >> I would just find myself eating the >> I would just find myself eating

the thing on top of the toast, but not thing on top of the toast, but not really the toast.

really the toast. >> Yeah. Yeah. Yeah. [snorts] I mean, I >> Yeah. Yeah. Yeah. [snorts] I mean, I bought in the last shop cuz I've had um bought in the last shop cuz I've had um somebody stay in with me for a few days somebody stay in with me for a few days and you know, I don't want to and you know, I don't want to necessarily enforce on them only what I necessarily enforce on them only what I eat, even though they're they're eat, even though they're they're wonderful and they've got, you know, wonderful and they've got, you know, they enjoy what I like as well. But I they enjoy what I like as well. But I bought some bread and I just thought, bought some bread and I just thought, what am I going to buy in? I'm scouring what am I going to buy in? I'm scouring them. Right. That's organic.

them. Right. That's organic. It's a sour dough. It's a sour dough. >> Mhm. Mhm. >> Mhm. Mhm. and it's solid, you know, and you only and it's solid, you know, and you only need half a slice.

need half a slice. >> And I think, well, I can cope with that. >> And I think, well, I can cope with that. And then I mean, I I probably won't buy And then I mean, I I probably won't buy a bread again for another month or so.

a bread again for another month or so. >> Yeah. >> Yeah. >> Yeah. >> Yeah. >> Yeah. >> Yeah. >> I don't have it at my house. No. >> I don't have it at my house. No. >> So, >> So, >> So, >> cuz it's an easy default, too, isn't it?

>> cuz it's an easy default, too, isn't it? >> Mhm. Yeah. >> Mhm. Yeah. >> That is the empty carbs. >> That is the empty carbs. >> Exactly. And that's what our society >> Exactly. And that's what our society tends to push as well, you know. So, tends to push as well, you know. So, yeah. It's not just, you know, having yeah. It's not just, you know, having the energy, having the correct the energy, having the correct information, but yeah, it's like what information, but yeah, it's like what are you putting in your system?

are you putting in your system? >> Yeah. Because that's got to muck up cuz >> Yeah. Because that's got to muck up cuz it's all about that will cause a massive it's all about that will cause a massive insulin release, won't it? Which is a insulin release, won't it? Which is a high and a crash.

high and a crash. >> Mhm. >> Mhm. >> Mhm. >> Which must affect the frequency >> Which must affect the frequency >> and the energy of the body hugely. >> and the energy of the body hugely. >> Yeah.

>> Yeah. >> Yeah. >> If you're doing that to yourself >> If you're doing that to yourself multiple times a day. multiple times a day. >> Yeah. Well, I mean, you know, it works >> Yeah. Well, I mean, you know, it works both ways. It's interesting because it's both ways. It's interesting because it's all connected.

all connected. >> Yeah. [clears throat] because you can >> Yeah. [clears throat] because you can get inflammation from the chemical get inflammation from the chemical process, right? You know, because process, right? You know, because >> we have so many things that are >> we have so many things that are attacking our system in a chemical way.

attacking our system in a chemical way. [snorts] [snorts] [snorts] >> Um, but also if you don't have proper >> Um, but also if you don't have proper voltage in your cells, well, the voltage voltage in your cells, well, the voltage is what controls that membrane around is what controls that membrane around the cell. Yeah.

the cell. Yeah. >> Right. So, if it doesn't have that >> Right. So, if it doesn't have that proper charge, then that membrane gets proper charge, then that membrane gets thicker. Oxygen, nutrients can't get in, thicker. Oxygen, nutrients can't get in, waste can't get out. That's waste can't get out. That's inflammation, inflammation, inflammation, >> right? So, inflammation can come both >> right? So, inflammation can come both ways. You need the proper energy, but ways. You need the proper energy, but also we need to mitigate all of the also we need to mitigate all of the things in our environment things in our environment >> that are inflaming us. You know, there's >> that are inflaming us. You know, there's so much nowadays.

so much nowadays. >> Yeah. >> Yeah. >> Yeah. >> So, yeah, >> So, yeah, >> it's a journey, isn't it? It really is. >>

it's a journey, isn't it? It really is.

>> Yeah. It's a lot to learn and it can be >> Yeah. It's a lot to learn and it can be overwhelming for some people at times, overwhelming for some people at times, but it's one thing at a time.

but it's one thing at a time. >> Yeah. >> Yeah. >> Yeah. >> You know, I always say it's like how do >> You know, I always say it's like how do you eat an elephant? Just one bite at a you eat an elephant? Just one bite at a time.

time. time. >> Absolutely. Yes. And it's great, isn't >> Absolutely. Yes. And it's great, isn't it? And it's one person at a time, isn't it? And it's one person at a time, isn't it? You know, who opens their eyes it? You know, who opens their eyes >> and then like you were saying about >> and then like you were saying about friends earlier, you know, people will friends earlier, you know, people will move in and out of your life according move in and out of your life according to what you and they tolerate, believe, to what you and they tolerate, believe, accept.

accept. accept. >> And that happens with the way you bring >> And that happens with the way you bring up your kids and up your kids and >> yada yada. We'll get there eventually.

>> yada yada. We'll get there eventually. She'll get there. We'll get there. you She'll get there. We'll get there. you know, if my if my father, who is, you know, if my if my father, who is, you know, in his 70s is finally getting on know, in his 70s is finally getting on board, like you It was funny. He started board, like you It was funny. He started not wearing his deodorant. My mom's not wearing his deodorant. My mom's like, "Why are you He's like, "There's like, "Why are you He's like, "There's aluminum in it." And she's like, "So, aluminum in it." And she's like, "So, [laughter] [laughter] [laughter] he's finally coming down the pathway he's finally coming down the pathway where he's like, he's going to a where he's like, he's going to a naturopathic doctor now. He's not naturopathic doctor now. He's not wearing, you know, deodorant that has wearing, you know, deodorant that has alum aluminum in it. He's more conscious alum aluminum in it. He's more conscious of what he's putting in his body. He's of what he's putting in his body. He's doing, you know, and he's in his 70s.

doing, you know, and he's in his 70s. So, hey, if he can do it, So, hey, if he can do it, >> anybody can do it. It's never too late. >> anybody can do it. It's never too late.

>> And he was a redhead before I stole it, >> And he was a redhead before I stole it, you know. So, [laughter] you know. So, [laughter] >> we're we're pretty hard-headed, you >> we're we're pretty hard-headed, you know. So, uh Yeah. So, if he can do it, know. So, uh Yeah. So, if he can do it, anybody can do it, [laughter] anybody can do it, [laughter] >> which is a really good testament, is it?

>> which is a really good testament, is it? And I mean, And I mean, >> it's got to help him feel better. >> it's got to help him feel better. >> Yeah.

>> Yeah. >> Yeah. >> And when you get to your 70s, anything >> And when you get to your 70s, anything that makes you feel better has got to be that makes you feel better has got to be good, surely, as long as it's good for good, surely, as long as it's good for you.

you. you. >> Yes. >> Yes. >> Yes. >> Yes. >> Yes. >> Yes. >> Yeah. I love it. >> Yeah. I love it. Oh, this has been amazing. I'm so happy Oh, this has been amazing. I'm so happy to have you both here. Thank you so so to have you both here. Thank you so so much for coming.

much for coming. >> Thank you for having us. We're so much >> Thank you for having us. We're so much fun. fun. fun. >> Yeah, it was a pleasure coming and I'm >> Yeah, it was a pleasure coming and I'm so glad that we got to so glad that we got to >> take time to do this with you. So, >> take time to do this with you. So, >> Oh, no. It's amazing. And this is the >> Oh, no. It's amazing. And this is the furthest up north you've been in the UK, furthest up north you've been in the UK, you said.

you said. >> Yes. Yeah. I've never been this far up >> Yes. Yeah. I've never been this far up north. So, now I'm inspired because of north. So, now I'm inspired because of how easy it was to get here.

how easy it was to get here. >> Yeah. Next time. >> Yeah. Next time. >> Yeah. >> Yeah. >> Yeah. >> Oh, yeah. I have no idea where I'm at >> Oh, yeah. I have no idea where I'm at actually. I just And like, we're going actually. I just And like, we're going here. I'm like, sure. That's usually here. I'm like, sure. That's usually [laughter] how it works. She's like, [laughter] how it works. She's like, "We're going to London." I'm like, "We're going to London." I'm like, "Okay." "Okay." "Okay." >> And now you're pretty much in the middle >> And now you're pretty much in the middle of England.

of England. >> Perfect. >> Perfect. >> Perfect. >> Pretty much. >> Pretty much. >> Okay. >> Okay. >> Okay. >> Yeah. >> Yeah. >> Yeah. >> Yeah. >> Yeah.

>> Yeah. >> This is great. >> This is great. >> Yeah. Well, let's come and stay and go >> Yeah. Well, let's come and stay and go and explore further. and explore further.

>> We'll do. We'll do. >> We'll do. We'll do. >> Thank you. >> Thank you. >> Thank you. Thank you for having us, Dr. >> Thank you. Thank you for having us, Dr.